

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/						51	
2		/					52	
3		/					53	
4		/					54	
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46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	1	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	3	←		←		←	TOTAL DEP.	←
TOTAL CLAIMS	4						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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